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## BIB DATA SHEET

CONFIRMATION NO. 2982

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/563,785	04/25/2006 RULE	604	1615	PA1394	
<b>APPLICANTS</b> John Nolting, Poway, CA; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US04/21506 07/01/2004 which claims benefit of 60/485,154 07/07/2003 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 06/15/2006					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /CARALYNNE E HELM/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWINGS</b> 4	<b>TOTAL CLAIMS</b> 29	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> MEDTRONIC VASCULAR, INC. IP LEGAL DEPARTMENT 3576 UNOCAL PLACE SANTA ROSA, CA 95403 UNITED STATES					
<b>TITLE</b> Coated stent with timed release of multiple therapeutic agents to inhibit restenosis adjacent to the stent ends					
<b>FILING FEE RECEIVED</b> 1480	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	